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APPLICATION NO.		FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/654,929	·	09/05/2000	Ryota Akiyama	1046.1100RE	7584	
21171	7590 02/09/2004			EXAMINER		
STAAS &	STAAS & HALSEY LLP				DIXON, THOMAS A	
SUITE 700 1201 NEW	YORK A	VENUE, N.W.		ART UNIT	PAPER NUMBER	
WASHING				3629		

DATE MAILED: 02/09/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

Applicati n N Applicant(s) 09/654.929 AKIYAMA ET AL. Interview Summary Examin r Art Unit 3629 Thomas A. Dixon All participants (applicant, applicant's representative, PTO personnel): (1) Thomas A. Dixon. (2) Joan Gilsdorf. Date of Interview: 05 February 2004. Type: a) ☐ Telephonic b) ☐ Video Conference c) Personal [copy given to: 1) applicant 2) applicant's representative] Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: _____. Claim(s) discussed: none. Identification of prior art discussed: none. Agreement with respect to the claims f) was reached. g) was not reached. h) NA. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The paper #24 sent 1/15/04 was a non-final rejection, box 2b should have been checked rather than box 3 for an Ex Parte Quayle action as indicated on the Office Action Summary. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required